JUN 2 5 2004 EIN THE UNITED STATES PATEI	NT AND TRADEMARK OFFICE
In Re Application of:)
Robert Castellano	
) Group Art Unit: 2665
Serial No.: 09/691,756)
) Examiner: Michael J. Molinari
Filed: October 18, 2000)
) Docket No.: 061607-1550
For: System and Method for Polling Devices)
In A Network System)
) RECEIVED
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(WITH AMENDMENTS)

Technology Center 2600

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

Applicant submits the following amendments and remarks to the non-final Office Action mailed from the United States Patent and Trademark Office on April 28, 2004 (Paper No. 5).

AUTHORIZATION TO DEBIT ACCOUNT

It is not believed that additional fees are required, beyond those which may otherwise be provided for in the documents accompanying this paper. However, in the event that additional fees are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. §1.136(a), and any fees required therefor (including fees for net additions of claims) are hereby authorized to be charged to Paradyne Corporation's Deposit Account No. 16-0255.

JUN 2 5 2004

2665

TRANSMITTAL LETTER (LARGE)

Docket No.

Applicant(s): Robert Castellano			061607-1550					
Serial No. 09/691,756	Filing Date October 18, 2			Conf	irmation No. 3872	Group Art Unit 2665		
Invention: System and Method for Polling Devices in a Network System RECEIVED								
Commissioner for Patents Mail Stop Amendment P.O. Box 1450 Alexandria VA 22313-1450					JUN 2 9 2004 Technology Center 2600			
Transmitted herewith is First Response (with Amendments) in the above-identified application. The fee has been calculated and is transmitted as shown below								
CLAIMS AS AMENDED								
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER E CLAIMS PR		RATE	ADDITIONAL FEE		
TOTAL CLAIMS	28 -	44 =	0	_	X \$18	3.00 \$		
INDEP. CLAIMS	3 -	5 =	0		X \$86	5.00 \$		
Multiple Dependent Claims (check if applicable) \$145.00						5.00 \$		
EXTENSION FEE	1 ST MONTH	2 ND MONTH	3 RD MONT 475.0		4 TH MONTH 740.00	\$		
Other Fees:								
	ENT \$0.00							
☐ Please charge ☐ A check in the ☐ A Credit Card	Payment Form PTO-2 hereby authorized to	cover the filing fee is 2038 is attached in t	enclosed. A he amount of	f \$		age is enclosed. overpayment to Deposit		

June 22, 2004 Date